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APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED
98 JUN 15 PM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

◀ Read Instructions on Other Side Before Making Entries ▶
Make Check Payable To: *Department of State*

1. Name and Mailing Address of Corporation: DOCUMENT # L89765

TURNER COOLING & HEATING, INC.
1417 27th STREET WEST
BRADENTON, FLORIDA 34205

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

Address
Address
City and State
Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 7-20-1990

4. FEI Number: 65-0205176

FEI Number Applied For
FEI Number Not Applicable

5. **$8.75 Additional Fee required for a Certificate of Status**
CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and/or Director

1 Title	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City and State
P	RICHARD TURNER	1417 27th STREET WEST	BRADENTON, FLORIDA 34205
S/T	DENISE TURNER	1417 27th STREET WEST	BRADENTON, FLORIDA 34205

REINSTATEMENT 96-98 B 6/16

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***1050.00 ***1050.00

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REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

RICHARD TURNER
1417 27th STREET WEST
BRADENTON, FLORIDA 34205

8. Name and Address of New Registered Agent and/or Office

Name
Street Address (Do NOT Use P.O. Box Number)
Street Address (Do NOT Use P.O. Box Number)
City and State FL. Zip

CR2E040 (8/92)

9. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Richard Turner Date: 6/10/98
REGISTERED AGENT MUST SIGN

10. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Officer or Director: Richard Turner Date: 6/10/98 Daytime Phone #: 941 745 1650

Typed or printed name of signing officer or director